BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10657054

CLAIMS AS FILED - PART I (Column 1)					(Column 2)			SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS					(Coldinii 2)		1	RATE	FEE		RATE	FEE
TOTAL OBAING			. 3.									750.00
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	
TOTAL CHARGEABLE CLAIMS			30 minus 20=		. N			X\$ 9=		OR	X\$18=	812
INDEPENDENT CLAIMS			5 minus 3 =		• .2			X42=		OR	X84=	118
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+140=		OR	+280=	
* If	the difference i	in column 1 is	less than ze	ro, enter	"0" in column 2			TOTAL		OR	TOTAL	1210
CLAIMS AS AMENDED - PART II								•		•	OTHER	
		(Column 1)		(Colur	nn 2)	(Column 3)	<u>.</u>	SMALL E	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 15	Minus	# 3()	=		X\$ 9=	\	OR	X\$18=	
	Independent	3)	Minus	*** 5)	=		X42=		OR	X84=	
ď	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=	
112,24/20174								TOTAL			TOTAL	/-
								ADDIT. FEE		OR	ADDIT. FEE	
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST								1001	1		4501
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	árk:		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	XXX		=		X42=		OR	X84=	
٩	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM							
+140										OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADOIT, FEE	L{
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		_i =		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1		-
											+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
**	The *Highest Nun	imber Previously Pa inber Previously Pa	aid For" (Total o	or Independ	dent) is th	e highest num	ber fo	ound in the ap	propriate bo	x in c	olumn 1.	